PTO/SB/31 (07-09)
Approved for use through 07/31/2012. OMB 0651-0031
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

| Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid CMB control number | | |
|--|--------------------|--------------------------|
| NOTICE OF APPEAL FROM THE EXAMINER TO | | Docket Number (Optional) |
| THE BOARD OF PATENT APPEALS AND INTERFERENCES | | BYG-101 |
| In re Application of | | |
| | Yigal M. Pinto | |
| | | |
| | | |
| | Application Number | Filed |
| | 10/575,745 | April 9, 2007 |
| | | NG A SUBJECT AT RISK OF |
| DEVELOPING HEART FAILURE BY DETERMINING THE LEVE | | |
| OF GALECTIN-3 OR THROMBOSPONDIN-2 | | |
| | | |
| | Art Unit | Examiner |
| | 1641 | G. W. Counts |
| | | |
| Applicant hereby appeals to the Board of Patent Appeals and Interferences from the last decision of the examiner. | | |
| The fee for this Notice of Appeal is (3) | 7 CFR 41.20(b)(1)) | \$ 540.00 |
| Applicant claims small entity status. See 37 CFR 1.27. Therefore, the fee shown above is reduced by half, and the resulting fee is: | | |
| A check in the amount of the fee is enclosed. | | |
| x Payment by credit card. Form PTO-2038 is attached. | | |
| The Director has already been authorized to charge fees in this application to a Deposit Account. | | |
| The Director is hereby authorized to charge any fees which may be required, or credit any overpayment to Deposit Account No. 07-1700 | | |
| X A petition for an extension of time under 37 CFR 1.136(a) (PTO/SB/22) is enclosed. | | |
| WARNING: INFORMATION ON THIS FORM MAY BECOME PUBLIC, CREDIT CARD INFORMATION SHOULD NOT BE INCLUDED ON THIS FORM, PROVIDE CREDIT CARD INFORMATION AND AUTHORIZATION ON PTO-2038. | | |
| I am the | | |
| applicant /inventor. | | /Megan A. Gustafson/ |
| | - | Signature |
| assignee of record of the entire interest. See 37 CFR 3.71, Statement under 37 CFR 3.73(b) | | |
| is enclosed. (Form PTO/SB | | Megan A. Gustafson |
| l — ` | • | Typed or printed name |
| x attorney or agent of record. | | |
| Registration number 65,8 | 347 | (0.00 500 1000 |
| | | (617) 570-1000 |
| attorney or agent acting under 37 CFR 1.34. Telephone number | | i elepnone number |
| Registration number if acting und | ler 37 CFR 1.34. | August 4, 2010 |
| Date | | |
| NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below. | | |
| X *Total of 1 forms ar | e submitted. | |